Entered - 01/02/01 - sb CL01L0007 - DIANNE C. MITCHELL

01-R-0158

CLAIM OF: GEICO AS SUBROGEE OF JULIA RETTERER

4295 Ocmulgee East Boulevard Macon, Georgia 31295-0001

For damages alleged to have been sustained as a result of a vehicular accident on June 11, 2000 at West Peachtree Street and Northside Drive.

BY PUBLIC SAFETY AND LEGAL ADMINISTRATION COMMITTEE:

BE IT RESOLVED by the Council of the City of Atlanta that the action of the Department of Law be approved in authorizing payment to GEICO AS SUBROGEE OF JULIA RETTERER the sum of \$1,000.00 in full settlement and satisfaction of all claims, past, present and future, of every kind and character for damages alleged to have been sustained as a result of a vehicular accident on June 11, 2000 at West Peachtree Street and Northside Drive as is more particularly set forth in the within claim; said sum taken from and charged to account 1A01/529017/T31001, Settlement of Suits and Claims, Department of Law.

APPROVED: SUSAN PEASE LANGFORD CITY ATTORNEY

POOLIS KUBELL TOWELL DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. <u>01L0007</u>	Date:
Claimant /Victim GEICO AS SUBROGEE OF	JULIA RETTERER
BY: (Atty)(Ins. Co.)	
BY: (Atty)(Ins. Co.) Address: 4295 Ocmulgee East Boulevard	. Macon, Georgia 31295-0001
Subrogation: X Claim for Property damage \$ 2.	ten, proper X Improper Ante Litem (6 Mo.) X Solvinian Statem (1 Mo.) Statem (2 Mo.) Statem (3 Mo.) Statem (4 Mo.) Statem (5 Mo.) Statem (6 Mo.) Statem (6 Mo.) Statem (6 Mo.) Statem (6 Mo.) Statem (7 Mo.) Statem (6 Mo.) Statem (6 Mo.) Statem (6 Mo.) Statem (7 M
Date of Notice: 12/12/00 Method: Writ	ten, proper X Improper
Conforms to Notice: O.C.G.A. §36-33-5 X	Ante Litem (6 Mo.) X
Date of Occurrence 07/28/00 Place	: 95 Ardmore Place
Department Police	Division:
Department Police Employee involved Kenneth William Healy	Disciplinary Action: Oral Admonishment
NATURE OF CLAIM: The driver of the City vehicle	e ran a red light and collided with the claimant's vehicle
causing damages in the above amount.	
INVESTIGATION:	
Statements: City employee Claimant	Others Written Oral X Dept Report Other
Pictures Diagrams Reports: Police	X Dept Report Other
Traffic citations issued: City Driver X	_ Claimant Driver
Citation disposition: City Driver	Claimant Driver
BASIS OF RECOMMENDATION:	
Function: Governmental X	Ministerial Other Damages reasonable
Improper Notice More than Six Months	Other Damages reasonable
City not involved Offer rejected	ed Compromise settlement X
Repair/replacement by Ins. Co.	Repair/replacement by City Forces
Claimant Negligent City Negligent X	Joint Claim Abandoned
, , , ,	
	Respectfully submitted,
	MULLIANNE C. MITCHELL
	INVESTIGATOR - DIANNE C. MITCHELL
RECOMMENDATION:	
Pay \$ 1,000 gg	1
Pay \$ 1,000.00 Adverse	count charged: 1A01 X 2J01 2H01 2H01 Concur/date 0/-23-07
Claims Manager: /////	
Committee Action:	Council Action
FORM 23-61	



Government Employees Insurance Company
GEICO General Insurance Company

GEICO Indemnity Company
GEICO Casualty Company

company IN Action (Sompany In Ac

Regional Office: 4295 Ocmulgee East Blvd. ■ Macon, GA 31295-0001 www.geico.com

ENTERED - 01L0007 - DIANNE MITCHELL

December 5, 2000

Atlanta City Counsel Attn: Municipal Clerk Trinity Avenue SW Atlanta GA 30335

RE: Atlanta City Police Department Vehicle # 25112

Driver: K Healy DOL: 06/11/00

Our Insured: Julia Retterer Our Claim # 0044675860101036

This letter is formal notice of our Subrogation intent in result of the above accident.

On June 11, 2000 our insured, Julia Retterer was driving through the intersection of West Paces Ferry Road & Northside Drive NW in Atlanta Georgia. As our insured proceeded through the intersection with a green light, your police vehicle also came through the intersection with no siren on and the two cars collided. Our investigation finds the Police vehicle at fault for failure to yield the right of way.

Following are our supporting documents. We ask that you review this claim and issue payment to GEICO.

If you have any questions, or need additional information, please feel free to contact me,

Sincerely,

Tiffany Cortez

GEICO Payment Recovery Unit

800-841-9160 x5956

DEC 12

GENERAL RELEASE AND INDEMNIFICATION

CLAIM NUMBER 01L0007			\$ <u>1,000.00</u>	
IN CONSIDERATION of	of the sum of	ONE THOUSA	ND AND NO/100	
DOLLARS, to be acknowledged, I do hereby, for discharge said City, its officers at all claims, demands, actions, cau or on account of anything that ha	myself, my he ad employees, in ses of action, su	irs, executors, a cluding but not l its, damages, los	imited to Kenneth Willian ss and expenses, of whatsoe	, release and forever n Healy, from any and ever kind or nature for
which occurred on or about the	11th	day of	June	
at or near <u>West Peachtree St</u>	reet and North	side Drive		······································
admission on the part of the City undersigned further covenants at servants and employees, from a agents, servants and employees, And I now state that the of the sum stated above; that no said City or its agents to cause r	y, its officers, aged agrees to indestruct of a large and all claim may be called used to the consideration of the promise of the consideration of the consi	gents, servants of the committee of the	harmless the City of Atlant costs which the said City of a result of the event hereinly g this release and indemnifing the kind or nature has been to	by whatsoever and the ta, its officers, agents, of Atlanta, its officers, before referred to. ication is the payment made to or with me by
instrument. WITNESS my hand and	seal this <u></u>	OCL day of _	Coucers	
		Tiff	SUBROGEE OF JULIA	(LS)
The above release was re	ad and explaine		by the said THEN	
		Steph	anie B. Evan	رها
		ami	anla S. How	and
		l	Witnesses	